Case 20-10164-elf Doc 34 Filed 09/21/20 Entered 09/22/20 11:12:23 Desc Main Document Page 1 of 3

200000					-					
Fill	in this information to ic	lentify your ca	se:							
Deb	otor 1 C	ynthia Sant	iago			_		88		
	otor 2 use, if filing)									
Unit	ted States Bankruptcy	Court for the:	EASTERN DISTRICT	OF PENNSYLVANIA		_				
Cas	se number 20-10	164					Check if this is:			
(If kn	own)						An amende	d filing		
<u> </u>						- 1 .	🗆 A suppleme	, -		chapter
01	fficial Form 1	<u>061</u>					MM / DD/ Y	YYY		
So	chedule I: Ye	our Inco	me							12/15
spot	use. If you are separa th a separate sheet t	ated and your	are married and not filir spouse is not filing wi On the top of any addition	th you, do not include	inforn	nation a	bout your spo	use. If more	space is n	eeded.
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse				
	If you have more tha	than one job,		☐ Employed			☐ Employed			
	attach a separate page with information about additional employers.		Employment status	■ Not employed			☐ Not employed			
			Occupation	Retired			- 10 To 10 T	*		
	Include part-time, se self-employed work.	de part-time, seasonal, or mployed work. Employer's name								· ·
	Occupation may incl or homemaker, if it a		Employer's address							
			How long employed to	here?						
Par	t 2: Give Detail	ls About Mon	thly Income							
Estii spou	mate monthly incom use unless you are sep	e as of the da	te you file this form. If	you have nothing to repo	ort for	any line,	write \$0 in the	space, Includ	de your non	-filing
	u or your non-filing sp e space, attach a sepa		re than one employer, co his form.	ombine the information fo	or all e	mployer	s for that perso	n on the lines	s below. If y	ou need
						Fo	r Debtør 1	For Debto		
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$			\$	0.00	\$	N/A			
3.	Estimate and list m	nonthly overti	me pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Inc	come. Add lin	e 2 + line 3.		4.	\$	0.00	\$	N/A	īa.

Debl	or 1	Cynthia Santiago	-2	Case number (if known)	20-10164	
	Сору	/ line 4 here	4.	For Debtor 1 \$ 0.00	For Debtor 2 or non-filling spouse \$ N/A	
5.	List a	all payroll deductions:				
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 0.00	\$ N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 0.00	\$ N/A	
8.	8a. 8b. 8c. 8d. 8e. 8f.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8c. 8d. 8e. 8f. 8g.		\$ N/A \$ N/A \$ N/A \$ N/A \$ N/A	
	8h.	Other monthly income, Specify: tax refund	_ 8h.+	\$ 375.00	+ \$ <u>N/A</u>	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$5,231.14	\$N/A	
10.			10. \$	5,231.14 + \$	N/A = \$ 5,231.14	
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				
11.	 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:					
12.	2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. 5,231.14 Combined					
13.	Do y	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	?		monthly income	

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Fill in this information to identify your	case:		
Debtor 1 Cynthia Santiago First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filling) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:	EASTERN DISTRICT C	PENNSYLVANIA	
Case number 20-10164 (If known)			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is N	OT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have reathat they are true and correct.	ad the summary and schedules filed with this declaration and
X /s/ Cynthia Santiago Cynthia Santiago Signature of Debtor 1	X Signature of Debtor 2
Date	Date